24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if 24-hour report 48-hour report New report Amends report filed	I on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Connection Strategy	M M / D D / Y Y Y Y
Mailing Address P.O. Box 2192	10 28 2016 Amount
City State Zip Code	24740.05
Arlington VA 22202	Transaction ID: 001 Date of Disbursement or Obligation
Purpose of Expenditure Phone calls Category/ Type 004	10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 03
Tarkanian, Danny, , , Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Disbut 2339273.20 Disbut 2016	ursement For: Primary General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Connection Strategy	10 28 2016
Mailing Address P.O. Box 2192	10 28 2016
110. 33X 2102	Amount
City State Zip Code	24740.05
Arlington VA 22202	Transaction ID: 002 Date of Disbursement or Obligation
Purpose of Expenditure Category/ Category/	M M / D D / Y Y Y Y
Phone calls Type 004	10 27 2016
Name of Federal Candidate Support Office	e Sought:
Rosen, Jacky, , ,	President Senate State: NV
Calendar Year-To-Date Disbu	ursement For: Primary X General
Per Election for Office Sought 2364013.25 2016	
(a) SUBTOTAL of Itemized Independent Expenditures	49480.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(2) 3321317E of Officialized Independent Experiences	
(c) TOTAL Independent Expenditures	49480.10
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Crosby, Caleb, , , [Electronically Filed] Date 1	10 29 2016
Signature	